Under the Pa	spenwork Reduction Act (of 1995, no person are	required to	respond to a collectio	n of informa	tion unless if display	ys a valid OM	8 control number	
Effective on 12/08/2004.				Complete if Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).						10/580,652-Conf. #5762			
FEE TRANSMITTAL				Filing Date September 25, 2006			***************************************		
For FY 2008				First Named Inventor Hisayoshi ITO			}	***************************************	
,,				Examiner Name G. Mesh					
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 1711						
TOTAL AMOUNT OF PAYMENT		(\$) 130.00	(\$) 130.00		Attorney Docket No. 2		2224-0260PUS1		
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
X Deposit Account Ceposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch,									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of X Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
		ILING FEES		ARCH FEES	EXAMI	NATION FEES	;		
Application T	one was	Small Entity	Eng. (6)	Small Entity	e== (4)	Small Entity	89.2.2.2	Ph. 124 200	
Utility	<u>yde Feel</u> 310		Fee (\$) <u>Fee (\$)</u> 255	Fee (§) 210	<u>Eee (\$)</u> 105	rees	Paid (\$)	
Design	210		100	50	130	65			
Plant	210		310.	155	160	80			
Reissne	310		510	255	628	310	***********	·	
Provisional	크용 210		27.0	دری 0	-020	310			
2. EXCESS CL		, 100	· ·	Ġ.	W	V :		County Coding	
2. EXCESS GLAIN FEES Small Ent Fee Description Fee (\$) Fee (\$)									
Each claim over 20 (including Reissues)							50	.25	
Each independent claim over 3 (including Reissues)							210	105	
Multiple dependent claims							370	185	
Total Claims Extra Claims Fee (\$) Fee P				'aid (\$)	id (\$) Multiple Depe			ident Claims	
	- 24 =0				<u> </u>	e (\$)	Fee Paid (<u>\$}</u>	
	ber of total claims paid fo				,				
Indep. Claims	Extra Claims	Fee (\$)	Fee F	'aid (\$)					
*********	•3 = 0	R =	50 3						
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings und	let 37 CFR 1.52(e)).	, the application si	ze fee du	e is \$260 (\$130 f	or small e	ntity) for each a	dditional 5	0	
Total Sheet	action thereof. See Extra Shee			3 / C.r.K. 1.10(8). dditional 50 or frac	Maria Marana	e baales	Ena	Marial (dt)	
1000 2000							- EXE	Paid (\$)	
- 130 = /50 = (round up to a whole number) x =									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1814 Statutory Disclaimer							130.00		
SUBMITED 8Y 92									
Signature	Contraction of the second	The Local Server		Registration No.	28,977	Telephone	(703) 20	5-8000	
Name (Print/Type) Gerald M. Murphy, Jr.				(Attomey/Agent)	worst (f	··········			
· · · · · · · · · · · · · · · · · · ·	Second tare tarrelly.	Arms April	ر 		***************************************	Date 1	vovember	LI, KUUI	

Birch, Stewart, Kolasch & Birch, LLP GMM/GMD/mua